

MARYLAND HEALTH CARE COMMISSION

Summary of the Healthcare-Associated Infections (HAI) Advisory Committee Meeting

May 27, 2009

Committee Members Present

Sara E. Cosgrove, MD, MS
Beverly Collins, MD, MBA, MS (via telephone)
Jacqueline Daley, HBS, MLT, CIC, CSPDS
Maria E. Eckart, RN, BSN, CIC
Elizabeth P. (Libby) Fuss, RN, MS, CIC
Anthony Harris, MD, MPH (via telephone)
Andrea Hyatt (via telephone)
Lynne V. Karanfil, RN, MA, CIC (via telephone)
William Minogue, MD
Peggy A. Pass, RN, BSN, MS, CIC
Michael Anne Preas, RN, BSN, CIC
Brenda Roup, PhD, RN, CIC
Jack Schwartz, Esq. (via telephone)

Committee Members Absent

Steven Goodman, MD, PhD
Carol B. Payne
Eli Perencevich, MD, MS

Commission Staff

Pam Barclay
Theresa Lee
Eileen Hederman
Deme Umo

Public Attendance

Hanan Aboumatar, MD, MPH- Johns Hopkins Center for Innovation in Quality Patient Care
Polly Ristaino, MS, CIC- Johns Hopkins Hospital
I-Fong Sun, Johns Hopkins University
Howard Carolan, Johns Hopkins University
Katie Passaretti, MD (via telephone)

1. Welcome and Introductions

Pam Barclay, Director, Center for Hospital Services, called the meeting to order at 1:00 p.m and stated all who were present in person and on the phone.

2. Review of Previous Meeting Summary (April 22, 2008)

Ms. Fuss and Dr. Cosgrove had revisions. Ms. Daley had a grammatical change. Staff will make the changes.

3. Presentation: Overview of the WIPES Infection Prevention Program

Ms. Barclay provided background information on the Governor's Health Quality and Cost Council. She said the Evidence-based Committee is reviewing quick-turnaround initiatives, including hand hygiene campaigns. Dr. Aboumatar, Dr. Cosgrove, and Ms. Ristaino from Johns Hopkins Hospital then presented the WIPES Infection Prevention Program and Hand Hygiene Program to the group. WIPES refers to:

- Wash/clean hands
- Identify and isolate early
- Precaution taking (use gowns, masks and gloves)
- Environment kept clean
- Share the commitment, raise your hand

Dr. Aboumatar said the program is in its third year and she reviewed the following program components:

- Communication campaign: multimedia including posters, banners, and screensavers.
- Education: online training, fact sheets, and discipline specific questions and answers.
- Environment optimization: hand sanitizer placement recommendations.
- Performance measurement: hand hygiene monitoring method and observers' online training.
- Feedback: data dissemination and recognition of top performers.
- Leadership engagement: included in communication campaign messages.

She said all hospital staff were made aware of this program. The data reporting tool is online and all data is transparent to everyone at the hospital. Units can see how they are doing over time. Images of top performing units are posted around the hospital and on screen savers to publicize the effort. Units' statistics are posted in their lunch room or other employee areas so they can see how they are doing and how they compare to other units.

Dr. Aboumatar said observations were done upon entry and exit from patient environments. This helps report back to the unit level. There is standardized training for all hand hygiene observers. Inter-rater agreement on 'compliant' observation is statistically significant.

Dr. Cosgrove stated observations on hand hygiene are done by undercover observers who may be light-duty nurses sent to different departments. She said there was more than a threefold increase in hand hygiene compliance at the hospital from October 2007 to April 2009 and a similar increase in alcohol-based hand rub consumption. Hand hygiene increased across all units and disciplines. Dr. Cosgrove said competition was critical for keeping the initiative going. Ms. Ristaino said weekly statistics are sent to each unit on their performance and the majority of observations are made on day shift. She said the minimum number of observations to report is 40 a month and at least 10 a week. Dr. Cosgrove said there is an institutional investment in the program. She said it takes years to ingrain the process into the culture. Ms. Ristaino talked about the challenges of trying to implement the program in the operating room. Dr. Cosgrove said there are also difficulties monitoring hand hygiene in units with no defined patient rooms like the emergency department. Simple rewards helped with the success of the program.

Ms. Barclay suggested a small group look more in depth at hand hygiene initiatives and possible statewide application. Dr. Cosgrove said hospitals should have outside validation of hand hygiene programs and observations.

4. Discussion on Surgical Site Infection (SSI) Data Collection

Ms. Barclay reviewed the data received from hospitals related to surgical site infections from the

2009 Annual Survey of Maryland Hospital Infection Prevention and Control Programs. She said thirteen hospitals are currently using NHSN to report SSIs. Hip and knee replacement surgeries are currently reported by all of these hospitals. She reviewed the volumes of procedures by hospital and noted that some procedures are not performed by all hospitals. The next step is to identify the procedures for SSI data collection and disseminate the proposal for hospital comment. Ms. Barclay said this will most likely start January 1, 2010. Dr. Harris suggested knee and /or hip replacement would be best surgeries to begin with. The group discussed other surgery options including hip, knee and cardiac surgeries and raised concern over the public reporting of small numbers. Ms. Barclay said advice from a statistician would be helpful on how to best report this data. After further discussion, the group agreed that the initiation of SSI data would begin with hip, knee, and cardiac (i.e., CABG) surgery. Ms. Barclay said a recommendation will be brought back to the advisory committee and also distributed to the hospitals for comment.

5. Other Business

Update on the American Reinvestment and Recovery Act (ARRA) Funding for State HAI Elimination Plans

Ms. Barclay stated that ARRA funding is available and proposals must be submitted to DHHS by June 26th. DHMH is planning to submit a proposal. The money will go through two existing funding streams to state health departments. One is Emerging Infections Program and the other is Epidemiology and Laboratory Capacity; Maryland is eligible to apply for both. The Epidemiology and Laboratory Capacity Fund focuses on healthcare-associated infections. Ms. Barclay said the HAI Advisory Committee will be an integral part of any funding the state receives. She said the CDC will notify states in August of funding awards. Committee members emphasized the need for funding for hospitals to help with reporting this data and the possibility of electronic reporting.

Status of HAI Data Collection and Reporting Activities

Ms. Barclay stated MHCC is close to releasing a Request for Proposal document to obtain an experienced contractor to validate the Central Line Associated Blood Stream Infection (CLABSI) data; only two other states have done this. The term of the contract awarded through this procurement is one year. Committee members suggested hospitals be notified that MHCC may be requesting certain lab data so they can prepare for the audit.

2009 Survey of AST for MRSA (Quarter 1) and 2008-2009 Health Care Worker (HCW) Influenza Vaccination Pilot Survey

Results of the Health Care Worker Survey will be sent back to hospitals for confirmation of the data they submitted. The hospital's numerator, denominator, rate, state average, and highest and lowest rates of all hospitals in the state will be provided to each hospital. HCW Influenza Vaccination rates will not be reported this first pilot year. Ms. Barclay said at the next meeting, the 2010 Survey will be reviewed for possible updates or revisions before the next flu season.

2009 Annual Survey of Maryland Hospital Infection Prevention and Control Programs

Ms. Barclay said staff are currently working on compiling this data which will be reported back to the Committee.

6. Adjournment

The meeting adjourned at approximately 3:20 p.m. The next meeting is scheduled for June 24, 2009.